STATEMENT OF

FORM 1	ORGANIZATION (See instructions)	Office use only
NAME OF COMMITTEE (in to the community of the commun	(Check if name Example: If typying, type is changed) over the lines	12FE4M5
WARNER MUS	SIC GROUP CORP PAC	
ADDRESS (number and s	75 ROCKEFELLER PLAZA	
(Check if address is changed)	NEW YORK	NY 10019 -
	CITY▲	STATE▲ ZIP CODE ▲
COMMITTEE'S E-MAI (Check if address is changed)	L ADDRESS (Please provide only one e-mail address) NOEMAIL	
COMMITTEE'S WEB	PAGE ADDRESS (URL)	
(Check if address is changed)	NOWEBPAGE	
 DATE 0.3 FEC IDENTIFICA IS THIS STATEM 	2 0 2 0 0 9 TION NUMBER C C00411074	
I certify that I have examined and Type or Print Name of	ned this Statement and to the best of my knowledge and belief it is true, correct a Treasurer Leslie J. Kerman	and complete
Signature of Treasurer	Electronically Filed by Leslie J. Kerman	Date 03 / D2D / YYYYYY
NOTE: Submission of fal	se, erroneous, or incomplete information may subject the person signing this Sta	
Office Use Only	For further information Federal Election Commis Toll Free 800-424-9530	